**吴中区教育局面向驻吴军人随军家属定向招聘教师资格审查登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 | | |  | | | | | | | 性别 | | | |  | | | | | 政治面貌 | | | | |  | | | | | （照 片） |
| 身份证号码 | | |  |  | |  |  | |  | |  |  | | |  |  |  | |  |  | |  |  |  | |  |  |  |
| 毕业院校 | | | | |  | | | | | | | | | | | | | | 毕业时间 | | | | |  | | | | |
| 学 历 | | | | |  | | | | | | | | 所学专业 | | | | | |  | | | | | | | | | |
| 联系电话 | | | | |  | | | | | | | | | | | | | | 户籍所在地 | | | | | |  | | | | |
| 家庭住址 | | | | | （邮编： ） | | | | | | | | | | | | | | | | | | | | | | | | |
| 主  要  简  历 | | 起止年月 | | | | | | | | 在何地、何单位、任何职 **（从初中开始填写）** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭  主要  成员 | | 称谓 | | | | | | 工作单位及职务 | | | | | | | | | | | | | | | | | | | | | |
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| 奖 惩  情 况 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **以上各项由报名者如实填写。一经发现作假，资格取消，责任由应聘者自负。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 初审  意见 | 审核人（签名）：  2020年 月 日 | | | | | | | | | | | | | | | | | 验证  意见 | | | 验证人（签名）：  2020年 月 日 | | | | | | | | |

注：本表一式二份。